

US Application No. 09/853,193
Amtd. Response Date: April 5, 2007

Attorney Docket No.: 6296.204-US
Examiner: Kam, Chih Min

AMENDMENTS TO THE CLAIMS

The following Listing of Claims replaces all prior versions, and listings, of claims.

LISTING OF CLAIMS

1. – 31. (Cancelled).
32. (Currently Amended) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering an insulin analogue to said critically ill patient or CIPNP patient in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said insulin analogue is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more.
33. (Previously Presented) The method of claim 32, wherein said insulin analogue is Asp^{B28} human insulin.
34. (Previously Presented) The method of claim 32, wherein said insulin analogue is Lys^{A28}, Pro^{B29} human insulin.
35. (Currently Amended) A method of treating a critically ill patient or a critically ill polyneuropathy (CIPNP)-patient having a blood glucose level of greater than 130 mg/dL, said method comprising administering an active derivative of an insulin analogue or a physiologically acceptable salt of said derivative to said critically ill patient or CIPNP patient in an amount effective to reduce blood glucose levels in said patient to within a range of from about 60 mg/dL to about 130 mg/dL, wherein said insulin analogue is administered intravenously and continuously infused to said patient as needed for at least 24 hours and the blood glucose level is maintained within a range of from about 60 mg/dL to about 130 mg/dL for 24 hours or more.
36. (Previously Presented) The method of claim 35, wherein said active derivative of an insulin analogue is des-Thr^{B30} human insulin γ Lys^{B29} tetradecanoyl.

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37. – 61. (Cancelled).
62. (Currently Amended) The method of claim 3240, wherein the patient is a human.
63. (Previously Presented) The method of claim 62, wherin the patient is non-diabetic.
64. (Currently Amended) The method of claim 3541, wherein the patient is a human.
65. (Previously Presented) The method of claim 64, wherein the patient is non-diabetic.
66. – 86. (Cancelled).
87. (New) The method of claim 32, wherein said patient is fed with a standardized feeding schedule of either total parenteral, combined parenteral/enteral or full enteral feeding.
88. (New) The method of claim 35, wherein said patient is fed with a standardized feeding schedule of either total parenteral, combined parenteral/enteral or full enteral feeding.
89. (New) The method of claim 32, wherein said insulin analogue is administered in a starting dose of 1 U/h.
90. (New) The method of claim 32, wherein said insulin analogue is administered in a starting dose of 2 U/h.
91. (New) The method of claim 35, wherein said active derivative of an insulin analogue or a physiologically acceptable salt of said derivative is administered in a starting dose of 1 U/h.
92. (New) The method of claim 35, wherein said active derivative of an insulin analogue or a physiologically acceptable salt of said derivative is administered in a starting dose of 2 U/h.